

APPLICATION DATA SHEET**Application Information**

Application Number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

CD-ROM or CD-R?:: No

Number of CD Disks::

Number of Copies of CDs::

Sequence Submission?:: No

Computer Readable Form (CRF)?:: No

Number of Copies of CRF::

Title:: Novel Sodium Channel

Attorney Docket Number:: WYE-089US

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure::

Total Drawing Sheets::

Small Entity?:: No

Licensed US Govt. Agency:: No

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status::

Given Name:: Rodrigo

Middle Name::

Family Name:: Franco

Name Suffix::

City of Residence:: Westford
State or Province of Residence:: MA
Country of Residence:: US
Street of Mailing Address:: 8 Casie lane
City of Mailing Address:: Westford
State or Province of Mailing Address:: MA
Country of Mailing Address:: US
Postal or Zip Code of Mailing Address:: 01886

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status::

Given Name:: Angela

Middle Name::

Family Name:: Hornsten

Name Suffix::

City of Residence:: Stow

State or Province of Residence:: MA

Country of Residence:: US

Street of Mailing Address:: 68 Adams Drive

City of Mailing Address:: Stow

State or Province of Mailing Address:: MA

Country of Mailing Address:: US

Postal or Zip Code of Mailing Address:: 01775

Correspondence Information

Correspondence Customer Number:: 54623

Representative Information

Representative Customer Number:: 54623

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	PCT/US2004/041668	12/10/04
PCT/US2004/041668	An application claiming the benefit under 35 USC 119(e)	60/529,404	12/12/03

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
		/ /	

Assignee Information

Assignee Name:: Wyeth
City of Mailing Address:: Madison
State or Province of Mailing Address:: NJ
Country of Mailing Address:: US